

DD Provider Integrity

September 2018

DD Provider Integrity

Purpose of training:

- ▶ Discuss policies and procedures for auditing DD providers who receive Medicaid funding
 - This includes all DD funded services (e.g. Day Habilitation, Infant Development, Residential Habilitation, etc.)

DD Provider Integrity

- ▶ In 2015 CMS conducted a review of the ND's Medicaid program integrity activities to assure the state's effectiveness in combating Medicaid fraud, waste, and abuse.
 - CMS found inadequate program integrity controls in many parts of the state's Medicaid program including;
 - not conducting fundamental program integrity activities,
 - lack of program integrity oversight of the Persons with Developmental Disabilities waiver program,
 - inadequate payment suspension procedures, and
 - insufficient provider enrollment practices and reporting.

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- ▶ CMS report continue:
 - The division operates outside of the Medical Services umbrella and has an annual budget of approximately \$200 million (of which 52% is federally funded) that is paid to 35 provider entities who provide services to approximately 4200 beneficiaries.
 - CMS report stated North Dakota must incorporate fraud and abuse oversight into waiver programs of this size.

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- ▶ CMS report continue:
 - ***Recommendations:*** To address the lack of program integrity controls in the Persons with Developmental Disabilities waiver programs, the state should:
 - Develop and implement policies and procedures to ensure program integrity oversight of the Persons with Developmental Disabilities waiver programs.
 - Establish processes among the PIU, the Developmental Disabilities Division, and the provider audit unit to coordinate the identification, investigation, and referral of suspected provider fraud in the Persons with Developmental Disabilities waiver programs to law enforcement.
 - Implement a compliance program that ensures providers, staff, and beneficiaries of the Persons with Developmental Disabilities waiver programs are trained how to report fraud.

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Authority:

- ▶ The Division is required to follow federal requirements in conducting reviews and investigations.
- ▶ Requirements are found in 42 CFR, Chapter IV, Part 455 – Program Integrity: Medicaid.
- ▶ Provider Integrity is governed by NDAC Chapter 75–02–05.

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Importance of Provider Integrity:

- Avoid unnecessary costs to the program due to fraud, waste, or abuse
- Assure that eligible recipients receive quality and cost effective care

Importance of Fiscal Integrity Protections:

- Essential to prevent improper payments
- Vital to the continuation of services and programs
- Reduces and prevents fraud, waste, and abuse
- Allows States to continue to support services/programs

DD Provider Integrity

- ▶ DD Division Staff Reporting Responsibilities
 - All DHS staff are required to report allegations of fraud and abuse immediately to the Fraud, Waste, and Abuse (FWA) Administrator
- ▶ Provider Obligations
 - Required to release information to the DD Division as part of the Medicaid Provider Agreement form. The form specifies that as a part of the provider agreement to participate in the Medicaid Program, the provider agrees to, upon reasonable request, release information needed to support the services billed to the Department.

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DD Staff Reviewer Responsibilities:

- Annually, or as needed, the DD Division will determine audit topics relative to the services authorized
- Review provider records/utilization reports to determine if services are being delivered according to accepted DD policy and procedures which includes:
 - Requesting, collecting and analyzing documentation from providers and recipients files for case reviews
 - Documenting findings
 - Coordinate and provide training for providers concerning billing/documentation
 - Determine corrective action in cases where appropriate
- At the conclusion of the audit, submit a report to the DD provider and maintain a copy of the report in the provider's file

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Provider Responsibilities:

- ▶ Provide full disclosure of requested administrative, fiscal and program information within the requested timeframes. Documentation should support the service billed and include:
 - Date of service
 - Name of provider
 - Name of the Service being provided with in/out times for each service
 - Individual's name/Medicaid ID number
 - Staff who provided service (if using staff initials a legend of staff names must be provided)
 - Summary of tasks and activities performed during that time (daily rate providers can meet the requirement by one itemized list of routine tasks and a single entry every day)
 - The record should be written in clear language and without alterations
- ▶ Respond to corrective actions as applicable within the requested timeframes.

Provider Integrity

- ▶ Day Support Audit reviewed 9,000 claims from 1 / 1 / 17–6 / 30 / 17 and approximately \$26 million.
- ▶ Documentation examples:

Example 1

- ▶ Items blocked out for confidentiality:
 - Individual's name
- ▶ Items missing:
 - Dates of service – should have daily attendance
 - Provider name
 - Name of service(s) provided
 - Medicaid number
 - In/out times for service(s) provided
 - Staff who provided service (if using staff initials a legend of staff names must be provided)
 - Documentation is not individualized – shows many individuals being supported
 - Summary of tasks and activities performed during the day

Example 1

	Jan-17							TOTALS
	DAYS OF WEEK		2 thru 6	9 thru 13	16 thru 20	23 thru 27	30 thru 31	20/160
1		DD	9.25	8.75	8	12.5	1.75	40.25
2		DD	23	39.25	39	38.25	14.5	154
3		DD	24.25	39.75	32.25	39	15.75	151
4		DD	15	23.75	25.25	25.75	9.75	99.5
5		DD	14.5	25.25	21	25.25	10.25	96.25
6		DD	16	15.5	15.5	6	0	53
7		DD	18.75	28.5	29.75	29.75	12	118.75
8		DD	18.25	28.75	28	27.25	11.5	113.75
9		DD	9.25	18.75	18	13.5	7.75	67.25
10		DD	20.25	31.5	32	34.75	5.5	124
11		DD	6.5	12.25	13	13	0	44.75
12		DD	22.5	39.25	38.75	39	15.25	154.75

Example 2

- ▶ Items blocked out for confidentiality:
 - Provider name
 - Individual's name
- ▶ Items missing:
 - Name of service(s) provided
 - In/out times for service(s) provided
 - Medicaid number
 - Staff who provided service (if using staff initials a legend of staff names must be provided)
 - Summary of tasks and activities performed during the day

Example 2

[REDACTED]							May
Date		Last Name	First Name	Arrive	Depart	Hours	Present
5/1/2017	Mon	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/2/2017	Tues	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/3/2017	Wed	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/4/2017	Thur	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/5/2017	Fri	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/8/2017	Mon	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/9/2017	Tues	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/10/2017	Wed	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/11/2017	Thur	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/12/2017	Fri	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I
5/15/2017	Mon	[REDACTED]	[REDACTED]			8.00	<input type="radio"/> A <input checked="" type="radio"/> P <input type="radio"/> I

Example 3

- ▶ Items missing:
 - Provider name
 - Name of the service(s) provided with in/out times for each service
 - Individual's Name/Medicaid number
 - Staff who provided service (if using staff initials a legend of staff names must be provided)

Example 3

Month: June 2017

Use the tables below to keep track of the activities that are offered, and if the client participated or chose to just stay home.

	5	6	7	8	9
	Monday	Tuesday	Wednesday	Thursday	Friday
Activities that were offered by staff.	Gateway Mall -color Library - dit-to-dit Saratoga Park -lunch Garden Plots - garden club MPL	breakfast, waffle cards bingo eat outside art Library heritage garden	Volunteer @ Petsmart Walk outside Gateway - cards shake TCBY Library	McDonalds - coffee/ Breakfast Kirkwood - color Gateway - lunch - VSA Craft Club	Mall - Kirkwood Barnes & Noble VSA Art Lunch - Gateway Library Humane Society
Activities that client participated in/community involvement.	Gateway Mall -color Library - dit-to-dit Saratoga Park lunch - garden club Garden Plots - garden club MPL	branch - made pancakes Art Lunch @ gateway cards heritage garden	Volunteer Petsmart - clean cat cages Walk outside - Hobbie @ Petsmart Gateway - Snake / cards TCBY - waffle cone Library - dit coke and cards	McDonalds - coffee/ Breakfast Kirkwood - color Gateway - lunch - VSA Craft Club	Barnes & Noble - Crochet/color VSA Art class Lunch - Gateway Library - color Humane Society - Volunteer with cats.

Example 4

- ▶ Items blocked out for confidentiality:
 - Provider name
- ▶ Items missing:
 - Medicaid number
 - Staff who provided service (if using staff initials a legend of staff names must be provided)
 - Summary of tasks and activities performed during the day

Example 4

Agency Name

Individual Full Name _____												Month/Year _____												OSP Date _____												OSP'd Service(s) _____											
STAFF: If the individual is not OSP'd for the service - they cannot be included in that service until it has been authorized - please contact the Program Director.																																															
DAYS																																															
15 Min	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total V	Total D	Total S	Total I												
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4:45 - 5:00 P																																															
Monthly Totals:																																															
Codes: V - PreVocational Service D - Day Habilitation S - Small Group Employment Support I - Individual Employment Support A - Absent Please use a dash "-" if the individual is working alone in Individual Employment. Holidays leave blank. Under Individual Employment - only staff time is recorded when they are working with the individual.																																															

Example 5


- ▶ Items blocked out for confidentiality:
 - Provider name
 - Individual name
 - Medicaid number
- ▶ Items missing:
 - Staff who provided service (if using staff initials a legend of staff names must be provided)
 - More details in activity summary
 - In/out times for each service

Example 5




 Medicaid ID #  Date: 6-1-17 to 6-2-17

Day	Time	Activity	Vocational	Crew	Total
Monday					
Tuesday					
Wednesday					
Thursday	8am to 4pm	Social Skills, training, money skills, meds	6.25	1.75	8.00
Friday	8am to 12pm	Social Skills, training, money skills, meds	4.00		4.00
Total Hours			10.25	1.75	12.00



 Supervisor signature

Example 6

- ▶ Items blocked out for confidentiality:
 - Individual's name

T-Log Submitted ⓘ

Individual		Program	Employment Services--Day Supports
Type	General		
Notification Level	Low		
Summary	Pre Voc 12-330		
Description	refused lunch and went down to meeting room b and worked on designing ramps for his trailer on the computer. spent almost the whole afternoon working on the trailer then showed the design off to people in the office. spent a few minutes upstairs then met with RM. spent 0 tickets earned 30 tickets		
Reporter		Reported On	09/07/2018 03:30 PM
Follow-up			
Summary	Entered By		

Example 7

- ▶ Items blocked out for confidentiality:
 - Provider name
 - Individual name
 - Medicaid number
- ▶ Items missing:
 - Name of the Service being provided with in/out times for each service
 - A legend of staff names who provided services

Example 7

Consumer _____

Agency Name _____
DAILY LOG Month/Year 4/2017

Date/Time	Comments/Activities	Staff
4-2-17 9pm CC	Staff arrived at 9pm to _____ He was in room. Quiet night overall. Did make a bathroom trip at 12am. Pw _____	
4-3-17	woke up to take a shower at 6:50am. Ran water for 5min. Took shower for 15min. with prompts Pw finished getting ready. Came out to eat breakfast at 7:40am. Took meds and times on time. Went over hygiene checklist. Pocket check before work. Had chew spit out. Brushed teeth again. Refused to change pants that were dirty, but agreed to wash today sometime. Off to work at 8am.	
4-3-17 2p-5p	Picked _____ up at 12pm. Pocket check med done. Deposit checks, spending \$ and grocery shopping done. Worked outside. Showered at 2:30p. Lunch. Started laundry. Watched TV. At 3:45p made popcorn. Staff helped him melt right amount of butter.	

* Day Supports

Example 8

- ▶ Items blocked out for confidentiality:
 - Provider name
 - Individual name
 - Medicaid number
 - Staff name
- ▶ Items missing:
 - Name of the Service being provided with in/out times for each service

Example 8

Agency Name

Daily Service Log

Person Supported: _____

Date: MAY 2017

Shift Time	AM/ PM	Activities Completed	Supports Provided (Incl. #)	Training Obj. worked on (Incl #)	Comments	Staff Name
5/1	8am 4pm	Completed personal Cares. Completed all medications. Current Events reviewed. Reviewed the Job openings in the paper. Filled Medication planner. Completed Laundry. Reviewed the Right of the week & Self Advocacy. Exercised. Deep cleaned Kitchen. Menu planning, Made grocery list, Completed grocery shopping. Worked on Social Stories for the Blue Moose. Completed meal prep and clean-up.	S-1,S-3,S-4,S-5,S-6, S-7	6-A	Daily Score +3	

Roy's Day Documented 3 Ways

❖ Example 1

❖ Example 2

❖ Example 3

Roy's Day Example 1

Individual Name: Roy Rogers

Agency: XYZ

Medicaid #: 123-45-6789

Date: 9/3/18-9/7/18

Day	Day Habilitation	Prevocational Services	Small Group Employment Support	Individual Employment Support	Total	Staff
Monday (9/3/18)	8:15A-12P; Roy went to the thrift store to volunteer; folding clothes and organizing shelves. He then went to McDonalds for lunch. 3:45P-4P; Roy returned to day program site and listened to music until his ride came. (4 hours; 16 units)	0	12P-3:45P; Roy went to his group job at ABC where he cleaned the bathrooms and vacuumed the offices. (3hr/45min; 15 units)	0	7 hr. 45min; 31 units	ZZ
Tuesday (9/4/18)	1:45p – 4:00p; Mom dropped him off at 1:45p. Roy wasn't feeling well so relaxed and listened to music the rest of the afternoon (2hrs/15 min; 9 units)	8:00a – 11:15a; Roy started off in the kitchen preparing lunches for a workshop. He had an early lunch due to a Dr. Appointment @ 11:30a. Transit came to pick him up at 11:15a where he met his mom (3hr/15 min; 13 units)	0	0	5 hrs 30 min; 22 units	CS ZZ
Wednesday (9/5/18)			12p – 3:45p; Lawn crew staff picked Roy up at the grocery store and they had lunch at the park. Then went to the first site to work on contracted lawns the rest of the afternoon. Roy emptied the full lawn bags into the cans and weed-whacked.	8a – 12p; Worked at the grocery store stocking shelves, bringing in carts, and sweeping floors (4hrs; 16 units)	7hrs/45min; 31 units	CS RP

Roy's Day Example 1 Continued

Day	Day Habilitation	Prevocational Services	Small Group Employment Support	Individual Employment Support	Total	Staff
			Got back just in time for Transit to take him home. (3hrs/45 min; 15 units)			
Thursday (9/6/18)	11:15a – 2:30p; Roy came back to the building had lunch and decided to partake in BINGO. (3hrs/15 mins; 13 units)	2:30p – 4:00p; Roy decided to finish his day out peeling potatoes (1hr/30 mins; 6 units)	10a – 11:15a; Lawn crew staff picked him up to work on contracted lawns. Roy was mowing lawns until they got rained out. (1hr/15 min; 5 units)	8a – 10a; Worked at the grocery store learning cashier duties (2hrs; 8 units)	8hrs; 32 units	ZZ CS RP
Friday (9/7/18)	0 Went home with parents. Roy was looking forward to a relaxing weekend after his busy week	0	0	0	0	ZZ
Total Hours:	9hrs/30 min; 38units	4hrs/45mins; 19 units	8hrs/45 min; 35 units	6hrs; 24 units	29hrs; 116 units	ZZ

Staff Name and Initials

Ziggy Ziegler - ZZ

Charlie Starkist - CS

Roy's Day Example 2

Individual Name: Roy Rogers

Agency: XYZ

Medicaid #: 123-45-6789

Date: 9/3/18-9/7/18

Day	In/out time	Summary of activities	Day Habilitation	Prevocational Services	Small Group Employment Support	Individual Employment Support	Total	Staff
Monday (9/3/18)	8:15A-4P	In the morning Roy went to the thrift store to volunteer; folding clothes and organizing shelves. Roy went to McDonalds for lunch. In the afternoon Roy went to his group job at ABC where he cleaned the bathrooms and vacuumed the offices. Roy returned to day program site and listened to music until his ride came.	8:15A-12P, 3:45P-4P (4 hours; 16 units)	0	12P-3:45P (3hr/45min; 15 units)	0	7 hr. 45min; 31 units	ZZ
Tuesday (9/4/18)	8a-4p	Roy started off in the kitchen preparing lunches for a workshop. He had an early lunch due to a Dr. Appointment @ 11:30a. Transit came to pick him up at 11:15a. Mom met him at the appointment. After the Dr. appointment, mom took Roy to Dairy Queen. Mom dropped him off again @ 1:45p. Roy	1:45p – 4:00p (2hrs/15 min; 9 units)	8:00a – 11:15a (3hr/15 min; 13 units)	0	0	5 hrs 30 min; 22 units	CS ZZ

Staff Name and Initials

Roy's Day Example 2 Continued

Individual Name: Roy Rogers

Agency: XYZ

Medicaid #: 123-45-6789

Date: 9/3/18-9/7/18

Day	In/out time	Summary of activities	Day Habilitation	Prevocational Services	Small Group Employment Support	Individual Employment Support	Total	Staff
		they got rained out at 11:15a. Roy came back to the building had lunch and decided to partake in BINGO. That ended around 2:30 so Roy decided to finish his day out peeling potatoes						
Friday (9/7/18)	Absent	Went home with parents. Roy was looking forward to a relaxing weekend after his busy week	0	0	0	0	0	ZZ
Total Hours:			9hrs/30 min; 38units	4hrs/45mins; 19 units	8hrs/45 min; 35 units	6hrs; 24 units	29hrs; 116 units	ZZ

Roy's Day Example 3

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC
XYZ																													
456 Boardwalk Ave.																													
Monopoly, USA																													
Attendance:																													
456 Boardwalk Ave.																													
Monopoly, USA																													
Medicaid #:																													
April 1 - 30, 2018																													
					</																								

Roy's Day Example 3

[illegible]

DD Provider Integrity

Guidelines to Conduct Reviews:

- Reviews are intended to provide assurance that services are being delivered in accordance to the individual's plan.
- The reviewer will use the most current Provider Integrity Manual to review the selected services including service documentation and payment records.

DD Provider Integrity

Audit:

- The audit is conducted in a three step process:
 1. Payment histories are reviewed to assure the client had a plan authorizing the specific service. Payments on the entire history are reviewed to look for inaccurate coding, overbilling for a specific service, odd service combinations, and other unusual issues.
 2. Desk audits will be completed unless there is a specific concern that becomes evident during a review.
 3. Over billing or over payments may be corrected by an adjustment or repayment and the provider is sent a letter outlining the process.

DD Provider Integrity

- ▶ DD Provider Integrity Manual can be found on the DHS website.

<http://www.nd.gov/dhs/services/disabilities/docs/dd-provider-integrity-manual.pdf>

DD Provider Integrity

Questions

